

REQUEST FOR PLUMBING / MECHANICAL INSPECTION

DATE: 1-28-21 TIME: _____ : AM / PM

JOB ADDRESS: 11219 Heronosa Court

PERMIT NUMBER: 17157

- | | | |
|-------------------------------|-------------------------------|---|
| <input type="checkbox"/> Pass | <input type="checkbox"/> Fail | Street Clean In Front of Property- (Nothing in Gutter) |
| <input type="checkbox"/> Pass | <input type="checkbox"/> Fail | Dirt, Mud, Construction Tracks in Front of Property |
| <input type="checkbox"/> Pass | <input type="checkbox"/> Fail | Trash Anywhere on Property |
| <input type="checkbox"/> Pass | <input type="checkbox"/> Fail | O-Tolerance for Lunch Trash This May Result in Project to be Temporarily Shut Down! |
| <input type="checkbox"/> Pass | <input type="checkbox"/> Fail | Dumpster full to the Lip & Needs to be Serviced |
| <input type="checkbox"/> Pass | <input type="checkbox"/> Fail | Port-O-Can Door Facing Away From Street |
| <input type="checkbox"/> Pass | <input type="checkbox"/> Fail | Port-O-Can Screened and/or Needs Maintenance |
| <input type="checkbox"/> Pass | <input type="checkbox"/> Fail | Tree Protective Fencing Down |
| <input type="checkbox"/> Pass | <input type="checkbox"/> Fail | Filter Fabric Fencing Down |
| <input type="checkbox"/> Pass | <input type="checkbox"/> Fail | High Grass and/or Tall Weeds |
| <input type="checkbox"/> Pass | <input type="checkbox"/> Fail | Overall Condition of Construction Site <u>Good</u> <u>_____</u> Poor |
| <u>_____</u> Verbal Warning | | <u>_____</u> Site Cleaned at Insp. <u>_____</u> City Citation Issued <u>_____</u> City Notified |

INSPECTOR: Bob Baldwin

INSPECTION DATE: 1-28-21

PLUMBING

- 1. Water line
- 2. Rough In
- 3. Top Out
- 4. Shower Pan
- 5. Sewer Line
- 6. WC Flange
- 7. GTO
- 8. Plumbing Final
- 9. Pool Drainage
- 10. Site Drainage
- 11. Irrigation Final
- 12. Other

MECHANICAL

- 1. Vent Hood
- 2. Rough/cover
- 3. Mech Final
- 4. Water Heater Final
- 5. Fire Sprinkler cover
(need MVFD approval)
- 6. Fire Sprinkler Final

PASS	FAIL
DATE: <u>1-28-21</u>	
TIME: <u>12:30</u>	
INSPECTOR: <u>BBB 3330</u>	

CONTRACTOR/CALLER NAME: Tower Plumbing

CONTACT TEL/PGR/MOBILE: 713-726-0601

INSPECTOR COMMENTS: _____

4 Shower Fans

Reinspection fee required